

APPLICATION DATA SHEET

Application Information

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| Application Number:: | 10/733,407 |
| Filing Date:: | December 12, 2003 |
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD Disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | Paper |
| Computer Readable Form (CRF)?:: | Yes |
| Number of Copies of CRF:: | |
| Title:: | METHODS AND MEANS FOR MODULATING CELLULOSE BIOSYNTHESIS IN FIBER PRODUCING |
| Attorney Docket Number:: | 1021565-000122 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 8 |

Small Entity?: No

Latin Name:

Variety Denomination Name:

Petition Included?: No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: Australia

Status: Full Capacity

Given Name: Joanne

Middle Name: Elizabeth

Family Name: BURN

Name Suffix:

City of Residence: Murrumbateman

State or Province of Residence:

Country of Residence: Australia

Street of Mailing Address: 2 Ryslipp Drive, PO Box 345

City of Mailing Address: Murrumbateman

State or Province of Mailing

Address::

Country of Mailing Address:: Australia

Postal or Zip Code of Mailing Address:: NSW 2582

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Australia

Status:: Full Capacity

Given Name:: Richard

Middle Name:: Edward

Family Name:: WILLIAMSON

Name Suffix::

City of Residence:: Murrumbateman

State or Province of Residence::

Country of Residence:: Australia

Street of Mailing Address:: Wybalena, Butts, Rd

City of Mailing Address:: Murrumbateman

State or Province of Mailing Address::

Country of Mailing Address:: Australia

Postal or Zip Code of Mailing Address:: NSW 2582

Correspondence Information

Correspondence Customer Number:: **21839**

Phone Number:: 703 836 6620

Fax Number: 703 836 2021

Representative Information

Representative Customer Number:: **21839**

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|----------------------|--------------------------------------|-----------------------------|-----------------------------|
| This application | Claiming benefit under 35 USC 119(e) | 60/432,674 | 12/12/02 |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
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Assignee Information

Assignee Name:: Australian National University

Street of Mailing Address::

City of Mailing Address:: Canberra ACT

State or Province of Mailing
Address::

Country of Mailing Address:: Australia

Postal or Zip Code of Mailing
Address:: 2601